



Corps Chief's Message

By COL Rebecca S. Hooper
Chief, SP Corps

Once again I'm pleased to be sending out to you a superb edition of the *Medallion*. I must admit that I'm terribly proud of the efforts of MAJ Sonya Corum and CPT Sunny Mills in the production of this tremendously important communication medium.

As MAJ Corum departs for CHPPM and CPT Mills leaves for Ft. Meade this summer, I know all of you join me in thanking them for their time, patience, and accomplishments here in the SP Corps Office. I will miss them both...and look forward to welcoming their replacements, MAJ John Kent and CPT(P) Yvette Woods onto my staff. To be exact, I will welcome them to OUR staff. The truth is, all of us in the Chief's office are here to serve you, the members of the Army Medical Specialist Corps.

The Corps Chief's Recommended Reading List for Leader Development

- *Management of the Absurd* (Farson R: Management of the Absurd. Touchstone, New York, New York, 1996.)
- *Army Medical Specialist Corps* (Army Medical Specialist Corps. Department of the Army, Washington, D. C., 1968.)
- *Duty: A Father, His Son, and the Man Who Won the War* (Greene, B: Duty: A Father, His Son, and the Man Who Won the War. Harper Collins, New York, New York, 2000.)
- *My American Journey: An Autobiography* [of Colin Powell] (Powell C, Persico JE: My American Journey: An Autobiography. Random House, New York, 1995.)

Suggestions for "The Corps Chief's Recommended Reading List" are always welcome. Readings that aid in leader development are the focus of this list. Send recommendations for consideration to CPT Mills at james.mills@cen.amedd.army.mil.

New SP Corps Motto

The new official Army Medical Specialist Corps motto was announced on 18 April 2001 at the SP Corps 54th anniversary celebration event "A Night at the Oscars" (see related article on page 6). The new motto, "***Soldiers First, Professionals Always***" was submitted by CPT James Mills (PT)

***Soldiers First,
Professionals Always***

and selected by the SP Corps Leadership Team. Other outstanding submissions by CPTs Philip Cox (OT) and Deydre Teyhen (PT) were considered as well. Thanks to all that submitted their suggestions.

Inside this issue:

54th Anniversary Events	3
Phantom Life Line	4
RAMSCA	5
LTHET	6
Research Guidelines	8
Operation Aegis	9
SPs In The News	10
Letters To The Chief	12

Special points of interest:

- ***TSG PA Award and NEW C, SP OT/PT/DT Award***
- ***Answers to Common LTHET Questions***
- ***Special SP Corps Pen Available for Purchase***

Looking For A Special Farewell Gift ?

Fellow Dietitians, Occupational Therapists, Physical Therapists, and Physician Assistants,

The Society of European Physician Assistants (SEPA) has developed the quintessential tool for every member of the medical community. However, as of yet, it has been exclusively designed for members of the Medical Specialist Corps. It is a ball-point pen with a built-in self-inking stamp in the top. The pen is black with gold trim and proudly bears the crest of the Medical Specialist Corps in the same colors. The stamp is about the size of a return address label, holds up to three lines of information and, best of all, you can "do it yourself." Just like the larger, bulky stamps that many use, this stamp comes with a wide selection of letters, numbers, and symbols; so as your career changes, your stamp can be

The pen/stamp is convenient mentation, and even fits in the shot record. Through an initial pens can be ordered through deluxe gift box. The catch is **GREAT** price, we have to or-I can assure you that it is well will use every day.

The pens will take approximately the order is placed and address. We need an initial re-erated enough interest then the contact me at visit the SEPA web page for tripod.com. This offer may months, so if you don't get in on the initial order then we can't guarantee this kind of a bargain for the future. Thanks for your support of SEPA and **YOUR** Medical Specialist Corps.

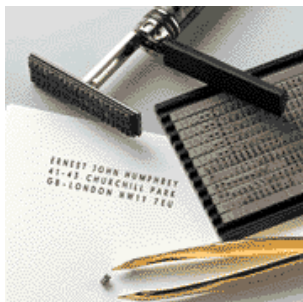
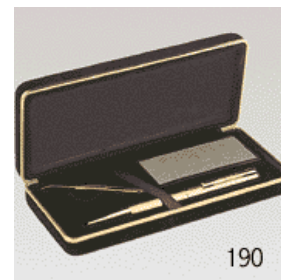
Society of European Physician Assistants

for medical records and docu-space provided on the yellow bulk purchase agreement, the SEPA for \$15 each, or \$18 in a that in order to get this der at least 1000 pens initially. worth it and something that you

mately 6 weeks to complete can be shipped directly to your sponse to know that we've gen-order will be placed. Please bighamrpac@hotmail.com, or more details: <http://europeanpa>. only last for a couple of



Point of Contact:
2LT Ronny P. Bingham
SEPA Secretary
CMR 452 BOX 1921
APO AE 09045
bighamrpac@hotmail.com



SP Corps 54th Anniversary Celebrations

By MAJ Sonya J.C. Corum
Executive Fellow to the Chief, SP Corps

How we celebrated our 54th Anniversary...

The SP officers at General Leonard Wood Army Community Hospital held an anniversary potluck celebration. The *Guidon*, Fort Leonard Wood's paper, featured an article with photos of SP Corps healthcare providers at work.

The WRAMC SPs toasted to "54 years of Excellence." The most senior officer from each area of concentration (AOC) made a toast to one of the other specialties in recognition for the fine work that each member of the Army Medical Specialist Corps continues to provide each day. A professionally designed poster presentation was displayed in the dining room during the month of April. It was also displayed during the SP anniversary celebration. The display depicted the history of the SP and explained the role and mission of each AOC (see picture below).



WRAMC SP Corps 54th Anniversary Celebration Poster

CPT Stephanie Meyer at Ft Eustis created a bulletin board that highlighted key events in the SP history. The bulletin board was displayed outside the dining facility. The post newspaper featured the Corps anniversary.

At PERSCOM the SP officers celebrated the anniversary with an interactive display. COL Brenda Mosley assessed grip strength and provided the norms so their guests could see how they rated. MAJ Polly Gross took guests' blood pressure. She discussed with them the importance of regular blood pressure checks and what constitutes high blood pressure. MAJ Danny Jaghab provided nutrition tips along with comparisons of fat content for a variety of foods. MAJ Kerrie Golden provided running shoe assessment and information on proper running shoe selection for various foot types. Cake and punch were served and enjoyed by all. All the guests enjoyed the interaction with the SP staff and also took away some valuable information (see picture).



COL Brenda Mosely Assesses Grip Strength for a Participant at PERSCOM's SP Corps 54th Anniversary Celebration

DDEAMC SP officers hosted a reception in honor of the anniversary. During the reception, Nutrition Care personnel were recognized for recent accomplishments (see picture below).



DDEAMC's SP Corps 54th Anniversary Celebration Cakes: The SP officers and NCOs at Eisenhower Army Medical Centepooled their money and catered the event to celebrate the SP Corps 54th Anniversary of service to our nation on 27 April 2001.

COL Rebecca Hooper hosted the first annual SP Corps Anniversary Golf Tournament followed by a luncheon. Both active duty and retired SP officers participated in the event as well as mem-



The winning team of first annual SP Corps Anniversary Golf Tournament: (pictured left to right) CPT Bob Cole (PA); Don Parson (Ret. PA); COL Elvin Maxwell (Director, IPAP); not pictured CPT Rick Walton (PA)

(Continued on page 6)

New Occupational Therapy Facility Open House



COL Bonnie De Mars (outgoing OT Consultant - left) and LTC Karen Cozean (incoming OT Consultant - right) cut the cake during the Open House in celebration of "April is OT Month" and in celebration of the new OT facility at the AMEDDC&S. The OT Branch began occupation of its new facility in late Dec 2000.



MAJ Harrison-Weaver (OT Branch Chief), COL Val Rice (former Branch Chief), COL Frank Blakely (AMEDDC&S Chief of Staff) and COL Rebecca Hooper (Chief, SP Corps) tour the new facility. Approximately 75 people attended the OT Open House which was a huge success!

Training Exercise Phantom Life Line

By CPT Sharon Newton

Last October the 85th Medical Detachment (Combat Stress Control) joined other units of the 13th Corps Support Command (COSCOM) in Phantom Life Line. This is an annual "logistics" exercise to practice deploying large numbers of vehicles and troops. Occupational therapy practitioners CPT Sharon Newton (65A) and SGT(P) Daniel Fernandez (91BN3) are members of the 85th Med Det and participated as members of Combat Stress Control (CSC) Prevention Teams. We loaded our vehicles on rail cars at Ft Hood, met them at the Port of Beaumont, Texas, and then convoyed to Camp Bullis. The various Prevention Teams of our unit went to the Battalions they would be supporting throughout the exercise. Although we were on different teams, we had similar experiences, some with "real" casualties and some role-playing.

Every day we made contact with the leaders and soldiers of our supported units – checking for general morale and stress levels, and the affects these were having on the mission. We were able to identify the affects of stress and sleep deprivation by observing soldier performance, and make recommendations accordingly. (There were definitely some "real" stress casualties – living in rain and knee-deep mud for 10 days under continuous operations can take its toll!) One opportunity to observe the soldiers' functional performance occurred when CPT Newton assisted in serving dinner. Over 200 soldiers came through the line, providing a brief glimpse into how they were doing. Out of those 200 plus soldiers, about 12 were starting to show signs of sleep deprivation, and about three of those showed definite cognitive deficits that required recommendations for

management.

In addition to this command consultation role, we had the opportunity to practice some of the other functional mission areas of combat stress control like neuropsychiatric triage and reconstitution support. After a large part of a company was "killed" by the enemy, we were able to role play what we would do to help reconstitute the unit. This included conducting a critical event defusing to the survivors, and suggesting ways to integrate the new members into the unit.

Some major themes emerged, especially how being new to a unit or the Army can create additional stress for the soldier. In addition, any existing problems within the commands worsened under the increased stress of the poor conditions and continuous operations. We learned a lot, too, like the value of good leadership in preventing battle fatigue casualties, and the importance of the CSC unit making prior contact with supported units in garrison. The value of O.T. was evident in identifying persons with stress reactions. It was shown that the use of occupational therapy's ability to observe people's performance in determining functional deficits and stress reactions was very beneficial. Sometimes even more so than just asking the soldiers how they were doing. Even though O.T. is not normally a part of a Prevention Team, the CSC doctrine states that all members of a CSC unit have a role in prevention. Phantom Life Line provided an opportunity to illustrate the value of O.T. in the CSC prevention mission. (For a complete list of lessons learned, contact CPT Newton at DSN 738-5602, Commercial: 254-288-5652/5602).

Farwell Pictures



Left Picture: COL Rebecca Hooper (Chief, SP Corps) and COL Bonnie De Mars (outgoing Assistant Chief, SP Corps, Chief, OT Section and SP Corps Specific Branch Proponency Officer).

Right Picture: COL Margaret Applewhite (outgoing Assistant Chief, SP Corps, Chief, DT Section and Nutrition Care Program Manager).



Both COL De Mars and COL Applewhite received as farewell gifts from the SP Officers a chronological series of original line drawings depicting the historical progression of OT and DT related SP Corps caducei, respectively. Both were also presented with traditional Hawaiian leis. COL De Mars' farewell luncheon was held at Tomatillo's Restaurant in San Antonio, TX on April 13th, 2001 and COL Applewhite's farewell luncheon was held at the Ft. Sam Houston Golf Course on February 22nd, 2001.

PT Ortho Residency Program Now to Confer DScPT Degree

*By CPT(P) Matt Garber
Director, USA Orthopaedic PT Residency*

I am very pleased to announce that the Board of Regents at Baylor University unanimously approved the proposal to confer a Doctor of Science in Physical Therapy (DScPT) degree to qualified graduates of the US Army Orthopaedic Physical

Therapy Residency at BAMC. This will take effect 1 June 2001. This advanced clinical degree elevates our program to the highest levels of academic and clinical excellence. A press release from Baylor is forthcoming. I extend my utmost appreciation to all those individuals who's hard work and support of our program throughout this process has made it a success.

RAMSCA Supports the SP Corps - Convention Scheduled for June 01

*By MAJ Sonya J.C. Corum
Executive Fellow to the Chief, SP Corps*

Have you heard about RAMSCA? RAMSCA stands for the Retired Army Medical Specialist Corps Association. This organization was established in 1983 to facilitate communication and camaraderie among retired and other previous members of the Army Medical Specialist Corps and the Women's Medical Specialist Corps as well as active duty. RAMSCA is committed to supporting the goals of the SP Corps either through human resources or financial assistance.

RAMSCA is instrumental in preserving our history and supports the endeavors of other organizations involved in the preservation of military history. As a part of their historical preservation efforts, RAMSCA provides financial support to the AMEDD Museum.

RAMSCA is also an organization that recognizes excellence. They recognize outstanding accomplishments of both RAMSCA members and active duty through their awards program. RAMSCA is also invested in the future through their college scholarship fund.

RAMSCA will hold it's 10th Biennial Meeting 18-21 June 2001 in Las Vegas, NV. Active duty, retired SP's and friends of RAMSCA are invited to attend. There will be business meetings, briefings and many social events. This has traditionally been a great opportunity to meet old friends. Please contact LTC (Ret) Nancy P. Hansen at 415-897-5872 or NPHansen@aol.com if you are interested in attending. **You don't have to be retired to be a member!** So, if you are interested in more information about RAMSCA activities or would like to become a RAMSCA member, contact RAMSCA at P.O. Box 39451 Serna Station, San Antonio, TX 78218-1451.

SP Corps 54th Anniversary Celebrations (cont.)

(Continued from page 3)

bers from other corps. Although, we may not have any budding Tiger Woods in the Corps, great fun was had by all.



COL (Ret.) Mary E. Lucas, 11th Chief, SP Corps (1986-1989), tees off at the first annual SP Corps Anniversary Golf Tournament.



"A Night At The Oscars" Reception for the Fort Sam Houston SP Corps 54th Anniversary Celebration. The Oscar winning film "Towards Independence" can be seen on the screen in the back ground.



SP Officers and Friends at "A Night At The Oscars": (pictured left to right) LTC George Dilly (DT); MAJ Laurie Sweet (DT); Beth Wheeler (Wife of MAJ Will Wheeler); MAJ Will Wheeler (DT and Master of Ceremonies for the reception)

Frequently asked questions about Long-Term Health Education and Training (LTHET)

By LTC Leonard Cancio

DHET SP/VC Corps Program Manager

1. I'm thinking about applying for the Specialist Corps LTHET program. How and where do I begin?

The Specialist Corps LTHET announcement is released annually by world-wide message and over the SP website in December of each year. The announcement includes information on general eligibility requirements, qualifying degree programs, specialty training programs, and application procedures. Read the message carefully. Contact MAJ Kuwamoto, the SP/VC Corps Program Manager, at (210) 295-9428 or DSN 421-9428 if you have further questions.

2. I have 1 year left on my Active-Duty Service Obligation (ADSO) from previous training. Am I allowed to apply for centrally funded LTHET training?

The SP Corps policy requires that you have no more than 6-7 months remaining on an existing ADSO prior to the start date of a new training program. Since the application process begins in the FY prior to the start date of graduate or specialty training, you may be eligible to apply. Check with your PERSCOM advisor.

3. I would eventually like to apply for the LTHET program. When should I begin my application process?

The time to begin is now. Finding the right time to return to school requires extensive planning. PCS moves, family commitments, and military and professional education all play a part in your career development. You should consider all of these factors in planning for a graduate or specialty training program. Identify an academic or specialty program you are interested in

(Continued on page 7)

The Surgeon General's Physician Assistant Recognition Award Winner Announced

By MAJ Sonya J.C. Corum
Executive Fellow to the Chief, SP Corps

Congratulations to 1LT James J. McIllewee!

The Surgeon General's Physician and Physician Assistant Recognition Awards Board convenes annually under OTSG Regulation 15-33 to select three physicians and one physician assistant who has made significant contributions to military medicine. During the Society of Physician Assistants (SAPA) Conference, 1LT McIllewee, who is currently assigned to the 172d Combat Support Battalion in Fort Wainwright, Alaska, was recognized as The Surgeon General's Outstanding Physician As-

sistant of the Year.

As 1LT McIllewee so eloquently stated he was just doing his job, but he received this honor because someone took the time to nominate him for the award. This Award of Excellence is a nominative process. When the message announcing the request for nominations is released in August, invest the time to nominate your junior officers who excel.

New MECOM Reg. 15-8 "The Chief, Army Medical Specialist Corps Award of Excellence for Occupational Therapists, Physical Therapists, and Dietitians"

By MAJ Sonya J.C. Corum
Executive Fellow to the Chief, SP Corps

Recognition for company grade occupational therapists, physical therapists and dietitians did not exist until this year with the birth of MEDCOM Regulation 15-8. This regulation entitled "The Chief, Army Medical Specialist Corps Award of Excellence for Occupational Therapists, Physical Therapists, and Dietitians" provides personal recognition by the Chief, SP Corps to one company grade officer from each of the Occupational Therapist,

Physical Therapist, and Dietitian Sections who has made outstanding contributions to the accomplishment of military medicine in his/her respective field. The award is intended to recognize excellence in leadership, job performance and self-improvement. This award is a nominative process. Be on the outlook for the message requesting nominations in August 2001. If you would like a copy of this new regulation please contact CPT James Mills at james.mills@cen.amedd.army.mil or DSN 471-8306/COMM 210-221-8306.

Questions About LTHET (cont.)

(Continued from page 6)

and discuss your plans with your supervisor and/or AOC Consultant. Degree programs offered will vary, depending on the current and projected needs of the Corps. Remember the application and selection process begins more than a year before the program begins. Normally the sequence of events are as follows: the SP LTHET announcement is released in Dec 2001. The application deadline is 1 May 2002. The SP LTHET selection board meets in Jun 2002 and the results are release around Aug 2002. Those selected begin their programs in Jul/Aug/Sep 2003. Planning for the LTHET program should begin long before the release of the SP LTHET announcement.

4. The graduate program I am applying for does not require a GRE; do I still need to take the exam?

Yes, the GRE, along with your photo, ORB, OERs, and other supporting documents, are used by the board in determining the best candidates for degree programs. Remember, GRE scores up to 5 years old are acceptable for the boarding process. You do not need to take the GRE for physician assistant specialty training

programs.

5. I'm unable to provide a letter of acceptance from the university as their acceptance committee will not meet until after the SP LTHET Board.

If the university you are applying for is unable to provide a letter of acceptance, a letter from a university representative, stating you are competitive, will suffice for your application packet.

6. I've heard that you can be removed from school or specialty training if you are passed over for promotion. Is this correct?

Yes. Officers non-selected for promotion during the first year of training in a Masters Degree Program or during the first or second year of a PhD Program will be terminated from training at the completion of the current semester. Officers non-selected in the last year of a masters or PhD (75% completed) will be allowed to complete the program. Officers in specialty training during the first two-thirds of their training will be removed from training.

SP Corps Clinical Investigation Guidelines

By LTC Max Ito

SP Corps Clinical Investigation and Research Consultant to the Surgeon General

AMSC professions have an obligation to seek, generate, and publish evidence of their practices to ensure professional viability, growth, and survival. The AMSC has long acknowledged the need for research to advance the knowledge base and produce clinical evidence and products that benefit the soldier. SP officers are selected and sent to graduate research degree programs every year. These programs assist in developing crucial research competencies, which are key to any successful research effort. All SP officers are encouraged to participate in some level of research, and there is much you can do, even as a novice.

The basic guidelines below are written to assist clinicians interested or involved in the research process, especially those who may lack research experience and competence. It is important to understand that conducting research is a regulated activity, and you must comply with the Federal laws, Army regulations, and institutional policies that govern human subject research. These policies serve to protect the human subjects (health, safety, and privacy), the government, and you the investigator. Failure to abide by these policies may constitute a violation of established laws and regulations. For more information, contact your clinical investigations office for a copy of the applicable laws, regulations, policies, and procedures.

“It is important to understand that research is a regulated activity....”

Basic Guidelines

1. Submit a memo describing your project idea to your Institutional Review Board (IRB) to determine if it falls under the rules governing human subject research. If it does, you may then be required to submit a research protocol, and go through the human-use review and approval process. Be aware that administrative, CQI, demonstration, and survey projects may fall under the "research" umbrella, depending on confidentiality issues, data sensitivity, data utilization, and potential risks involved. It is not the investigator's decision or choice to have their project exempt from review; that authority and responsibility belongs to the IRB.

2. Protocol Development

A. Prior to writing a research protocol:

- Use the *FINER* principle to select an area of study. The study should be: **F**easible, **I**nteresting, **N**ovel, **E**thical, and **R**elevant (B. Neas, 2001 AMSC MLH Research Course)
- Conduct a thorough literature review and analysis related to the area of study

- List your research questions and develop the hypotheses
- Consult with a statistician to help identify the appropriate research design, data type, data collection format, and analyses required (consider the strength of the design: i.e. randomized controlled trial vs. non-randomized trial vs. a non-experimental study)
- Determine sampling method and size estimate
- Determine testing and data collection methodology (consider validity & reliability)

B. *Develop and write the research protocol.* Protocol templates vary by institution but typically include the following:

- Executive summary
- Introduction
 - Background
 - Literature review summary
 - Research questions
- Relevance
- Hypotheses
- Methods
- Sampling description
- Statistical analyses
- Risks to subjects and safety
- References
- Volunteer Agreement form
- List of all test measures
- Data forms (include demographic questionnaires, pain scale, etc)
- Investigator(s) credentials
- Other required institutional or IRB forms

3. *Submit protocol for approval* by following your institution's established procedures. This is usually done through the IRB, and may entail more than one level of review.

4. *Test preparation and setup:* train support staff, and calibrate all testing and data collection instruments to ensure that conditions are consistent for all subjects. Anticipate and control for confounding factors as best as possible to minimize sampling and testing biases. Ensure that all safety concerns have been addressed prior to testing.

5. *Recruit test subjects* only after obtaining all required approvals and clearances. Participation in studies should be strictly voluntary with no coercion or incentives allowed. Test subjects should be fully informed (consider the ethical dilemma of withholding certain treatment in randomized clinical trials with control groups).

6. *Start the study* (experimental or clinical trials, data collection) only after the protocol has been fully approved. No deviations from the protocol are allowed without IRB approval. Complete

(Continued on page 12)

This Is Operation Aegis !

By COL Valerie J. Rice
Director, Operation Aegis

At the direction of The Surgeon General, LTG Peake, Operation Aegis: Injury Control Program was initiated in October 1999. Sponsored by the Army Medical Department Center and School. Members of the Aegis staff include:

COL Valerie Rice, SP, Director
LTC Annette Bergeron, SP, Assistant Director
CPT Allyson Pritchard, SP (previous staff/Assistant Director)
CPT Vicky Connolly, SP, Intervention Officer
SSG Shelia Mickelson, NCOIC
SFC Mark Kenyon (previous staff/NCOIC)
Dr. Mary Mays, Statistician
Mr. Darrell Gerik, PT/OT
Ms. Ileana King, Administrative Assistant
Mr. Claude Lee, Data Technician

In recent years the costs associated with musculoskeletal injuries have captured the attention of business and military leadership (Jones and Amoroso, 2000). These costs are substantial not only in terms of dollars but also in affecting the mission of the organization (Peake, 2000). In 1998, 20% of clinic visits and 11% of hospital admissions of soldiers assigned to Fort Sam Houston were coded with a primary diagnosis of musculoskeletal injury (DMED, 1999), at an estimated cost of \$2.5 million dollars.

The goals of this project are (1) to reduce musculoskeletal injuries on Fort Sam Houston and (2) to provide written guidance for other posts to use in developing an injury prevention program. The process to reach these goals consists of defining the current problems, developing intervention programs designed to prevent injury, and evaluating the program. Opera-

tion Aegis staff has focused on identifying musculoskeletal injuries that occur on Fort Sam Houston among active duty personnel, specifically AIT soldiers assigned to the 187 and 232 Battalions of Center Brigade. Surveillance data has been collected since September 1999 when soldiers in-/out-process, when they visit the TMC for sickcall, and after they've received a profile.

The graph below (*figure 1*) provides a "snapshot" of the percentage of soldiers who are already experiencing musculoskeletal symptoms when they arrive for AIT at Fort Sam Houston. This data covers the period of January – April 2001.

As part of a macroergonomic approach to injury prevention, Operation Aegis staff has addressed operational as well as policy concerns. Some of the methods used include: assisting battalions in the implementation of policy/SOP changes, developing Injury Control Advisory Committees, instructing Drill Sergeant/Cadre (shoe fit, injury control, running), and establishing/evaluating a running template designed to reduce injury rates while maintaining APFT pass rates.

Operation Aegis staff has been disseminating information through reports and briefings, both on Ft. Sam Houston and throughout the military. Recent presentations were given at the Recruit Healthcare Symposium, the International Ergonomics and Safety Conference, the MTF Senior Leadership Conference, and the 2001 Tricare Conference. Participation in the DoD Occupational Illness and Injury Prevention Committee and DoD Ergonomics Committees has also assisted in the injury prevention process.

As the project comes to an end later this year, Operation Aegis will publish results and make recommendations for future injury control initiatives. For exercise and injury-related bibliographies, articles and links, check out the Operation Aegis website at <http://www.cs.amedd.army.mil/aegis/>. Questions can be addressed to any of the team members listed above (210-221-0118).

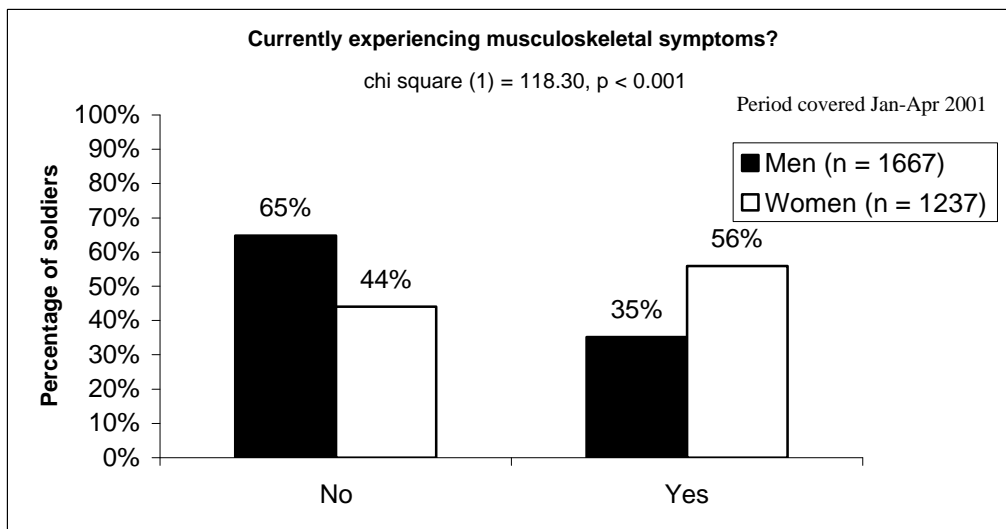


Figure 1: Percentage of soldiers with musculoskeletal symptoms prior to arrival at Ft. Sam Houston, TX for AIT

SPs In The News

Congratulations to the following individuals for their recent accomplishments!!

Meritorious Service Medal

COL Bonnie J. De Mars (OT)
LTC Annette Bergeron (PT)
LTC Megan Mills (PT)
MAJ Lorraine Breen (DT)

Army Commendation Medal

CPT Allyson Pritchard (PT)
SSG Kelli Daniels (91M)
SSG Michael Lesure (91M)
SGT Trafton Owens (91M)

Army Achievement Medal

SGT Adam Baskin (N3)
SPC Karla Hines (N9)

Order of Military Medical Merit

LTC Leo Mahony (PT)
MAJ Lorraine Breen (DT)
SGM Joey Collins (91M)

Distinguished Member of the Regiment

COL Margaret Applewhite (DT)

Honorary Member of the Regiment

Ms. Shirley Castner, GS-6, Physical Therapy Technician

COL Mary Lipscomb Hamrick Research Award

LTC Timothy Flynn (PT)

COL Mary Lipscomb Hamrick Research Course Abstract Award

CPT Tom Schumaker (PA)

The Myra McDaniel Writers Award

COL Valerie Rice (OT)
LTC (Ret) Steve Luster (OT)

EFMB

CPT Brendan Sullivan (PT)
1LT Zack Solomon (PT)
2LT John Hoffstetter (PA)
2LT Joseph Clarke (PA)

OTs who recently passed certification exams

LT Christine Caruso
LT Lorie Ficke

Certificates of Achievement

Kathy Detamore, GS-9, Registered Dietitian

Commanders Coin

SSG Gary Schutz (91M)

Promoted to SGT

SPC Daryl Paquet (91M)
SPC Trafton Owens (91M)
SPC Sonny Rodriguez (91M)

COL Valerie Rice was appointed to the NASA Science and Technology Working Group, which guides the NASA Space Human Factors Engineering project in order to apply the best of human factors research to the challenges of short and long duration space missions.

LTC Timothy Flynn received the APTA Orthopaedic Section's Excellence in Teaching Award. This is a national-level award for excellence in Orthopaedic Physical Therapy teaching. LTC Flynn was also named the outstanding Physical Therapy Alumnus at Marquette University for 2001.

LTC Robinette Amaker, an OT at WRAMC, received the American Occupational Therapy Association (AOTA) Service Award and the Distinguish Alumni Award, Nova Southeastern University.

MAJ Maria Bovill, a dietitian, celebrated Patriot's Day by running in the Boston Marathon.

MAJ Mike Voochies, a PA at Ft Lewis, completed the Ironman California race on Sunday May 20 in a time of 11 hours 12 minutes and 55 seconds. The course was a 2.4 mile swim, 112 mile bike and 26.2 mile run.

MAJ Christine Edwards, a dietitian, completed the rigorous process of being certified as Fellow of the American Dietetic Association.

CPT Shawn Scott, a physical therapist, was recognized as an Outstanding Military Volunteer for his efforts with the Wuerzburg High School wrestling program.

CPT Shawn Wells' (PA) Change of Command Ceremony was 7 May 2001. He was the B Company, 168th ASMB Company Commander at Camp Humphries, Korea. He is starting the Emergency Residency training at BAMC.

1LT Robin Jarrell, a dietitian at Fort Campbell, has been selected to the Fort Campbell Army 10 Miler Team and the All Army Triathlon Team.

The winner of the annual SAPA Poster Presentation Contest was 1LT John Miller, a physician assistant at the 528th Special Operations Support Battalion at Ft Bragg NC, for his presentation of a database program he developed for tracking soldier readiness while stationed in the ROK.

SFC Janelle Holt was the distinguished honor graduate from her EMT-B course held at BAMC, 05-23 Feb 2001. She was also named Instructor of the Quarter at AMEDD Center & School for

(Continued on page 11)

SPs In The News (cont.)

(Continued from page 10)
the 3rd Quarter FY 00.

SSG Fee at PT Branch, AMEDDC&S was named Instructor of the Quarter for 1st Qtr, FY 01.

The WRAMC Occupational Therapist Interns participated in the annual Uniformed Services University of the Health Sciences Research Poster Presentations. 1LT Patrice Stange presented "Adjustment Disorders: Functional Assessment and Occupational Therapy Implications in Combat Stress Control." 2LTs Joanna Atherton, Michelle Julian and Julie Pavlish presented "Comparing Two Splints for Basal Joint Arthritis."

The PT Branch Precision Lawn Chair Marching Brigade received Honorable Mention in the amusement category in the San Antonio Battle of Flowers Parade as part of the annual Fiesta celebration.

Published SP Officers

COL Valerie Rice (OT) and CPT Vickie Connolly (PA) co-authored "A comparison of traditional vs. 'new' physical training: The Rest of the Story." This will be presented at the proceedings of the International Society for Occupational Ergonomics and Safety XV Annual Conference in Reston, VA.

Co-authors COL Nancy Henderson, COL Stephen Allison, MAJ Robert Matekel, CPT(P) Matt Garber and Mr. Mike Ryder were recognized when COL Gail Deyle received the APTA Orthopaedic Section's Rose Excellence in Research Award for the following article: Deyle GD, Henderson NE, Matekel RL, Ryder MG, Garber MB, Allison SC. Effectiveness of manual physical therapy and exercise in osteoarthritis of the knee: A randomized, controlled trial. *Annals of Internal Medicine*, 132:173-181.

PT Faculty/Student Publication in the February issue of JOSPT: Girrback RT, Flynn TW, Browder DA, Guffie KL, Moore JH, Masullo LN, Bare AC, Bradley Y: Flexural wave propagation velocity and bone mineral density in females with tibial bone stress injuries vs. age-matched controls. *Journal of Orthopaedic and Sports Physical Therapy*, 31(2): 54-69, 2001.

CPT Allyson Pritchard published the following articles in the last two issues of the *AMEDD Journal*: Improper Backpack Wear May Lead to Injury (Jan-Mar 2001 issue); Running Shoe Design, Selection, Care: Does it Make a Difference? (April-June 2001 issue).

LTC Linda Rowbotham, Director, Prevention is PRIME Wellness Services at Walter Reed, was pictured in the May issue of Army Magazine, p.37. The article was titled "Outcomes Management at WRAMC, a Transformation of Army Health Care." The article outlined the \$10 million Comprehensive Outcomes Management Initiative at WRAMC.

Presentations at the AOTA Annual Conference: Philadelphia, April 2001

LTC Robinette Amaker presented "The U.S. Army Occupational Therapy Fieldwork Programs" and "An Occupational-Based Hand Therapy Home Program."

SGT Tracy Flowers presented "An Occupational-Based Hand Therapy Home Program."

I've Learned....

By COL Rebecca S. Hooper
Chief, SP Corps

If you will take the time to read these, I promise you'll come away with a new perspective. The subjects covered affect us all on a daily basis! They're written by Andy Rooney a man who has the gift of saying so much with so few words. Enjoy....

- I've learned.... That the best classroom in the world is at the feet of an elderly person.
- I've learned.... That just one person saying to me, "You've made my day!" makes my day.
- I've learned.... That being kind is more important than being right.
- I've learned.... That you should never say NO to a gift from a child.
- I've learned.... That no matter how serious your life requires you to be everyone needs a friend to act goofy with.
- I've learned.... That life is like a roll of toilet paper. The closer it gets to the end, the faster it goes.
- I've learned.... That money doesn't buy class.
- I've learned.... That to ignore the facts does not change the facts.
- I've learned.... That the easiest way for me to grow as a person is to surround myself with people smarter than I am.
- I've learned.... That everyone you meet deserves to be greeted with a smile.
- I've learned.... That opportunities are never lost; someone will take the ones you miss.
- I've learned.... That everyone wants to live on top of the mountain, but all the happiness and growth occurs while you're climbing it.
- I've learned.... That it is best to give advice in only two circumstances: when it is requested and when it is a life-threatening situation.
- I've learned.... That the less time I have to work with, the more things I get done.

Research Guidelines *(cont.)*

(Continued from page 8)

all required logs and lab books. Report (and document) any adverse event immediately to the appropriate authority.

7. *Official closure* of the study (following completion of data collection) with all required reports, disclosures, adverse event documents, etc.

8. *Data analyses.* Consult with your statistician as needed to ensure that statistical assumptions have been met, appropriate analytical procedures are applied, and that you understand the findings.

9. *Report finding.* Submit all abstracts and manuscripts for clearance and approval through your institution's reviewer/editor and to your commander. The cover sheet should reference an assigned protocol number, if applicable. Papers can be submitted for publication or presentation only after receiving proper clearances.

Additional Hints:

- Assist experienced researchers and learn the process.
- Seek guidance from an experienced research mentor. A well-designed and conducted study takes significant time, planning, and coordination. A good mentor can help you avoid common mistakes, oversights, and pitfalls, and provide solutions to problems.
- Your IRB or clinical investigations office should provide a sample protocol to use as a template.
- There is an "art & science" to developing a well-designed survey instrument (questionnaire). Use an off-the-shelf validated instrument, or seek assistance from an experienced and qualified survey researcher.
- Consult with a statistician early to avoid unrecoverable design or data problems later.
- Create a dummy data set and run it through a complete analysis, before the actual trials and data collection. This will help you see the end before you begin, as well as identify and correct any data structure, entry, or analysis problems early.
- Contact your respective AOC researchers at USARIEM, the AMEDDC&S, or other facilities for additional guidance.

Letters to the Chief

This is a new section in the Medallion. Newspapers around the country allow their readers to write to the editor and receive feedback that is published in their newspapers. Our spin of this is "Letters to the Chief" in which you have the opportunity to write to COL Rebecca Hooper, the SP Corps Chief and receive feedback that will be published in the Medallion. Your letters must include your name and contact information. You may mail your letters to Office of the Chief, SP Corps, ATTN: MCCS-CA, 2250 Stanley, Rd., Suite 276A, Fort Sam Houston, TX 78234-6100 or email them to CPT James Mills at james.mills@cen.amedd.army.mil.

Dear COL Hooper,

We have heard that chiropractors are coming on active duty? Will they have a defined scope of practice that will prevent overlap into the physical therapists' and dietitians' scope of practice? What is the real story with the chiropractors?

Sincerely, Officer Advance Course SP Students

Dear OAC SP Students,

Thank you for your letter. Your questions about the Chiropractic Health Care Demonstration Program (CHCDP) are similar to those I'm asked weekly by fellow SP officers or others in the AMEDD. Let me try to bring you all up to speed with what I know.

A little history always helps to give me some perspective so here goes. In 1992, the FY93 National Defense Authorization Act (NDAA) amended Title X to give the Services discretionary authorization to commission Doctors of Chiropractic (DC). Specifically for the Army, Chiropractors were authorized as a fifth section (65E) in the Army Medical Specialist Corps. As no resources were provided to the services to cover the increased manpower requirement and no wartime mission established, the Surgeons General from all three Services chose not to exercise the opportunity given them by Congress.

Via continued lobbying by the American Chiropractic Association and interest from Senator Strom Thurmond, the FY95 NDAA mandated a demonstration project (the CHCDP) to investigate the "feasibility and advisability" of providing chiropractic services in the military. Even though no funds were provided, the Services initiated care at Fort Benning, Fort Carson, Fort Jackson, Fort Sill, Scott AFB, Offutt AFB, Travis AFB, Jacksonville NAS, Camp Lejeune, and Camp Pendleton. Many of you have worked in these facilities and have first hand experience working with the civilian contract chiropractors and assistants.

The CHCDP was implemented as a three year "patient choice" study. Patients with specific ICD-9 coded diagnoses (neuromusculoskeletal problems of the spine) that presented at

(Continued on page 13)



U.S. ARMY MEDICAL SPECIALIST CORPS

Office of the Chief, SP Corps
ATTN: MCCS-CA
2250 Stanley Road, Suite 276A
Fort Sam Houston, Texas 78234-6100

Phone: 210-221-8306 (DSN 471-8306)
Fax: 210-221-8360 (DSN 471-8360)
Email: james.mills@cen.amedd.army.mil

PRIDE!

We're on the Web!
www.amsc.
amedd.army.mil

Letters to the Chief *(cont.)*

(Continued from page 12)

designated entry clinics were given the option to see a chiropractor or to receive traditional care. Design of the study did not include randomized assignment of patients to traditional versus chiropractic providers. In 1997, the FY98 NDAA extended the demonstration program by one year. This act also expanded the number of sites delivering chiropractic care. Walter Reed Army Medical Center, National Naval Medical Center, and Wilford Hall Air Force Medical Center were added to the existing locations. The FY00 NDAA extended the provision of chiropractic care but discontinued the demonstration program per se. Care has continued at the former demonstration sites" ever since.

The TRICARE Management Activity (TMA) delivered the Final Report of the CHCDP to Congress on 3 March 2000. Results suggested that patient satisfaction with chiropractic care was very high, and that while it is feasible to provide chiropractic, it is not advisable due to the additional cost.

Congressional interest continued and in late 2000, the FY01 NDAA (Section 702. Chiropractic Care for Members on Active Duty) stipulated that we, (the Services - Army, Navy, and Air Force) must develop a plan to phase-in chiropractic care for active duty beneficiaries. I sit on the Chiropractic Oversight Advisory Committee (OAC) which is working on that plan. It is currently winding its way through numerous wickets in TMA and Health Affairs.

What all this means is that in the next five years, we will be adding chiropractic services to some of our MTFs. Chiropractic clinics will operate as referral clinics just as they are operating now. Although we do not have an exact number of clinics to be added at this time, because the benefit was exclusively for active duty, the safe money is on posts with large active duty populations.

And now for the bottom line.....

All of us should understand that while the rumors continue to fly fast and furiously, there are no plans to commission chiropractors on the table at this time. Commissioning is a desired end-state for the chiropractic profession, but until and

unless a wartime mission is established, this does not appear likely.

Please help to dispel rumors and myths...if you have any specific questions, let me know.

COL Rebecca S. Hooper

Dear COL Hooper,

I have noticed that there is conflicting guidance in Army Regulations and varying usage of the abbreviations for the Army Medical Specialist Corps (AMSC or SP). What is the official abbreviation?

LTC Maria Worley
SP Corps Personnel Proponent Officer

Good question LTC Worley,

To be honest, I didn't know the answer until we started digging. I had always thought that the official abbreviation for the Army Medical Specialist Corps was "AMSC" and that "SP" was simply a short cut born out of the computer age when all the personnel transactions could only accommodate 2 digits. In fact, I was accused of trying to be different when I continued to use "AMSC" in my signature block as recently ago as 1999! (I won't mention who made this accusation but she is rather short and is the Chief of a large PT clinic in Washington, DC.)

There *are* conflicting regulations. The Army Correspondence reg, AR 25-50, still lists our Corps abbreviation as "AMSC". This contradicts DA PAM 600-4, AR 310-49 and AR 680-29, which state that "SP" is the official designation.

According to Mary Eichhorn, the regulation guru at OTSG, a change from "AMSC" to "SP" was submitted in 1992 for AR 25-50 but not all the regs have been updated. The change is being resubmitted. We should now use "SP" in all official communications, such as signature blocks, memos, etc.
COL Rebecca S. Hooper